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3.	Substitute for form 1449/PTO			Application Number	10/690,258-Conf. #3419		
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ءَ ا	STATEMENT BY APPLICANT			First Named Inventor	Oscar A. Chappel		
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	(Use as many sheets as necessary)			Examiner Name	L. G. Le		
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U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (If known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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